

Bureau of Health Care Quality and Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVS4880AGC	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 04/20/2010
NAME OF PROVIDER OR SUPPLIER SUNRISE OF HENDERSON		STREET ADDRESS, CITY, STATE, ZIP CODE 1555 WEST HORIZON RIDGE PARKWAY HENDERSON, NV 89012		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
Y 000	<p>Initial Comments</p> <p>The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws.</p> <p>This Statement of Deficiencies was generated as a result of an annual State Licensure survey conducted in your facility on 4/20/10. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division.</p> <p>The facility is licensed for 105 Residential Facility for Group beds which provide care to persons with Alzheimer's disease, Category II residents. The census at the time of the survey was 57. Fifteen resident files were reviewed and 15 employee files were reviewed. One discharged resident file was reviewed.</p> <p>The facility received a grade of C.</p>	Y 000		
Y 103 SS=D	<p>449.200(1)(d) Personnel File - NAC 441A / Tuberculosis</p> <p>NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (d) The health certificates required pursuant to chapter 441A of NAC for the employee.</p> <p>This Regulation is not met as evidenced by:</p>	Y 103		

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Y 103	Continued From page 1 Based on record review on 4/20/10, the facility failed to ensure 1 of 15 employees complied with NAC 441A.375 regarding tuberculosis (TB) testing (Employee #7). Severity: 2 Scope: 1	Y 103			
Y 106 SS=D	449.200(2)(a) Personnel File - 1st aid & CPR NAC 449.200 2. The personnel file for a caregiver of a residential facility must include, in addition to the information required pursuant to subsection 1, (a) A certificate stating that the caregiver is currently certified to perform first aid and cardiopulmonary resuscitation. This Regulation is not met as evidenced by: Based on interview and record review on 4/20/10, the facility failed to ensure 2 of 15 employees (Employee #7 -Missing CPR -Nursing license covers First Aid but does not cover CPR and Employee #8 did not complete CPR-FA within 30 days of hire) failed to complete training in first aid and/or cardiopulmonary resuscitation (CPR). Severity: 2 Scope: 1	Y 106			
Y 255 SS=F	449.217(6)(a)(b) Permits - Comply with NAC 446 on Food Service	Y 255			

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Y 255	<p>Continued From page 2</p> <p>NAC 449.217 6. A residential facility with more than 10 residents must: (a) Comply with the standards prescribed in chapter 446 of NAC. (b) Obtain the necessary permits from the Bureau of Health Protection Services of the Division.</p> <p>This Regulation is not met as evidenced by: Based on observation, interview and record review on 4/20/10, the facility failed to ensure the kitchen complied with the standards of NAC 446.</p> <p>Findings include:</p> <p>1 Critical Violations:</p> <p>a. There were numerous, badly dented cans of cream of potato soup and artichoke hearts on the food storage rack.</p> <p>b. There was an opened container of potato salad in the reach-in refrigerator that had expired on 4/17/10.</p> <p>c. There was an uncovered beverage on the cook's line prep table, belonging to the cook.</p> <p>2. Cleaning and Sanitation Issues:</p>	Y 255		

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Y 255	Continued From page 3 a. There were containers of soup in the walk-in refrigerator that were not accurately labeled, and an opened container of potato salad was not dated with the date that it was opened. b. There were numerous soiled, wet wiping cloths on the food preparation surfaces in the kitchen. c. There were containers of ice cream on the walk-in freezer floor. 3. Equipment and Maintenance Issues: a. The cutting boards on the cook's line were worn and no longer easily cleanable. b. The cold water was in disrepair on the kitchen food preparation sink. c. There were household grade refrigerator/freezers, microwaves, ovens, and a blender in the 2nd floor and 3rd floor serving kitchens. Severity 2: Scope: 3	Y 255			
Y 434 SS=E	449.229(3) Emergency Drills NAC 449.229 3. A drill for evacuation must be performed monthly on an irregular schedule, and a written record of each drill must be kept on file at the facility for not less than 12 months after the drill. This Regulation is not met as evidenced by:	Y 434			

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Y 434	Continued From page 4 Based on record review on 4/20/10, the facility did not ensure that monthly evacuation drills were conducted on an irregular schedule for the months of (June, July, August and October of 2009). This was a repeat deficiency from the survey on 4/21/09 State Licensure survey. Severity: 2 Scope: 2	Y 434			
Y 444 SS=C	449.229(9) Smoke Detectors NAC 449.229 9. Smoke detectors must be maintained in proper operating conditions at all times and must be tested monthly. The results of the tests pursuant to this subsection must be recorded and maintained at the facility. This Regulation is not met as evidenced by: Based on record review on 4/20/10, the facility did not ensure smoke detectors were tested 8 out of the past 12 months (April, May, June, July, August, September, October and November of 2009). This was a repeat deficiency from the 4/21/09 State Licensure survey. Severity: 1 Scope: 3	Y 444			
Y 859 SS=E	449.274(5) Periodic Physical examination of a resident NAC 449.274 5. Before admission and each year after	Y 859			

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Y 859	Continued From page 5 admission, or more frequently if there is a significant change in the physical condition of a resident, the facility shall obtain the results of a general physical examination of the resident by his physician. The resident must be cared for pursuant to any instructions provided by the resident's physician. This Regulation is not met as evidenced by: Based on record review on 4/20/10, the facility failed to ensure that 5 of 15 residents received an annual physical (Resident #4, #5, #6, #9 and #11). Severity: 2 Scope: 2	Y 859			
Y 876 SS=C	449.2742(4) Medication Administration NRS 449.037 NAC 449.2742 4. Except as otherwise provided in this subsection, a caregiver shall assist in the administration of medication to a resident if the resident needs the caregiver's assistance. A caregiver may assist the ultimate user of controlled substances or dangerous drugs only if the conditions prescribed in subsection 6 of NRS 449.037 are met. This Regulation is not met as evidenced by: Based on record review on 4/20/10, the facility failed to ensure that an ultimate user agreement was obtained for 11 of 15 residents (Resident #1, #3, #4, #5, #7, #9, #11, #13, #14, #15 and #16).	Y 876			

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Y 876	Continued From page 6 Severity: 1 Scope: 3	Y 876			
Y 878 SS=D	449.2742(6)(a)(1) Medication / Change order NAC 449.2742 6. Except as otherwise provided in this subsection, a medication prescribed by a physician must be administered as prescribed by the physician. If a physician orders a change in the amount or times medication is to be administered to a resident: (a) The caregiver responsible for assisting in the administration of the medication shall: (1) Comply with the order. This Regulation is not met as evidenced by: Based on record review and interview on 4/20/10, the facility failed to ensure that 1 of 15 residents received medications as prescribed (Resident #1 - Cipro and Lipitor). Severity: 2 Scope: 1	Y 878			
Y 936 SS=E	449.2749(1)(e) Resident file-NRS 441A Tuberculosis NAC 449.2749 1. A separate file must be maintained for each resident of a residential facility and retained for at least 5 years after he permanently leaves the facility. The file must be kept locked in a place that is resistant to fire and is protected against unauthorized use. The file must contain all	Y 936			

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Y 936	<p>Continued From page 7</p> <p>records, letters, assessments, medical information and any other information related to the resident, including without limitation: (e) Evidence of compliance with the provisions of chapter 441A of NRS and the regulations adopted pursuant thereto.</p> <p>This Regulation is not met as evidenced by: Based on record review on 4/20/10, the facility failed to ensure 7 of 15 residents complied with NAC 441A.380 regarding tuberculosis testing (Resident #1, #2, #3, #11, #14, #15 and #16).</p> <p>This was a repeat deficiency from the 4/21/09 State Licensure survey.</p> <p>Severity: 2 Scope: 2</p>	Y 936		

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